

# Marin County Community Development Agency

Alex Hinds, Director

## MERGER DETERMINATION APPLICATION

In accordance with Title 20 of the Marin County Code, application for a determination on whether the parcels described herein have merged.

### TO BE FILLED BY APPLICANT (Please type or print legibly)

1. Assessor's Parcel No(s): \_\_\_\_\_ Zoning: \_\_\_\_\_
2. Project Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_
3. Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_
4. Owner's Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_
5. Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_  
(if different from owner)
6. Applicant's Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

### SIGNATURE

I hereby certify that I have read this application form and that to the best of my knowledge, the information in this application and all the attached exhibits is full, complete, and correct. I understand that any misstatement or omission of the requested information or of any information subsequently requested shall be grounds for rejecting this application, deeming this application incomplete, or denying the application. I hereby authorize employees of the County of Marin to enter upon the subject property, as necessary to inspect the premises and process this application.

\_\_\_\_\_  
Signature of Owner(s)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

I hereby request a public hearing before the Marin County Zoning Administrator on this merger determination application. I understand that if I do not request a public hearing on this application, the merger determination will be made by the Planning Director without a public hearing.

**NOTE: SIGNATURE OF OWNER REQUIRED ONLY IF A PUBLIC HEARING IS REQUESTED.**

\_\_\_\_\_  
Signature of Owner

**TO BE FILLED IN BY PLANNING DEPARTMENT STAFF**

FEES:

Date Received: \_\_\_\_\_ Permit: \_\_\_\_\_

Receipt No: \_\_\_\_\_ Permit: \_\_\_\_\_

Received by: \_\_\_\_\_ Cat. Exempt: \_\_\_\_\_

Planner assigned: \_\_\_\_\_ Initial Study: \_\_\_\_\_

Concurrent Application: \_\_\_\_\_ Other: \_\_\_\_\_

Reviewing Authority: \_\_\_\_\_

Total: \_\_\_\_\_

Hearing: ( )

Non-Hearing: ( )

**MERGER DETERMINATION/APPLICATION SUBMITTAL REQUIREMENTS**

The following information is required for a Merger Determination application to be considered complete, except items indicated on this form as waived by the Planning Department. Within thirty (30) days of receipt of an application, the Planning Department will inform the applicant in writing if the application is complete, and if not, what items must be submitted. Processing of the application will not begin until it is complete. Please provide all requested information

1. A "legal description" of the property. This may be in metes and bounds or, by specific reference to a recorded subdivision map. The description must be on a separate 8" x 11" sheet of paper.
2. A completed Single Holding Form. This form may be obtained from the Planning Department. It must be filled out by a Title Company doing business in Marin County.
3. Such additional information as may be required by the Planning Director, including but not limited to:
  - a. Survey Map.
  - b. Topographic Map.
  - c. Valid building permit(s) or evidence of the date of construction of any structure on the parcel.
  - d. Preliminary Title Report.